



APR-28-2006 FRI 11:21 AM GAMBRO PATENT DEPT LKWD

FAX NO. 3032314198

P. 01

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GAMBRO, INC.
PATENT DEPARTMENT
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John R. Merkling (Depositor's name)
John R. Merkling (Signature)
4/28/06 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/709,079	04/12/2004	Dennis J. Hlavinka	B0023-US02	3078

TITLE OF INVENTION: METHOD FOR FLUID SEPARATION DEVICES USING A FLUID PRESSURE BALANCED CONFIGURATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	07/21/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS	FC	1400.00 DA	
SORKIN, DAVID L	1723	494-037000	01 FC-1501	300.00 DA	
			01 FC-0001	9.00 DA	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

John R. Merkling
Edna M. O'Connor
Laura Arciniegas

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Gambro, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Lakewood, Colorado USA

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

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 A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 032316 (enclose an extra copy of this form).

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Authorized Signature John R. MerklingDate 28 April 2006Typed or printed name John R. MerklingRegistration No. 31716

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